



FANSER

Nutrition Volunteer Care
Group Orientation Guide

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UNDERSTANDING THE LESSON PLAN



Lessons, stories, and activities in the Nutrition Volunteer Care Group Orientation Guide are meant to complement the information provided in Nutrition Volunteer Care Group Participant Flipchart.



Each lesson begins with **OBJECTIVES**. These are the behavior, knowledge and belief objectives that are covered in the lesson. Make sure that each of these objectives is reinforced during the lesson. There are four types of objectives. Each is described below.

Behavior objectives: Most objectives are behavioral objectives written as action statements. These are the practices that we expect the caregivers to follow based on the key messages in the Infant and Young Child Feeding Counselling Cards/Action Cards.

Knowledge objectives: For example, we want mothers and Caregivers to be able to name the danger signs as well as the five ways that diarrhea-causing germs are transmitted. These are facts that the caregivers must memorize during the lesson, using the pictures as a reminder.

Belief objectives: We know that beliefs and attitudes affect our practices. Many times it is a person's inaccurate belief or worldview that hinders them from making a healthy behavior change. In this module we are reinforcing the belief that change is possible.

Behavioral determinant objectives: Behavioral determinants are reasons why people practice (or don't practice) a particular behavior. Barrier Analysis¹ surveys identify the most important determinants for behavior change in a region. By reinforcing the determinants that have helped the doers (caregivers in the community already practicing the new behavior) we are able to encourage the non-doers (caregivers who have not yet tried or been able to maintain the new practices). We also help non-doers (caregivers who are not practicing new behaviors) to overcome obstacles that have prevented them from trying or maintaining the practice in the past. Behavioral determinants will be more prominent in future modules.



Under the objectives, all of the **MATERIALS** needed for the lesson are listed. The facilitator should make sure to bring all of these materials to the lesson.

¹ In the FANSER project, Promoters are paid a stipend. The role of the promoters is to train Nutrition Volunteers to facilitate lessons with their neighbors. A few exercises, noted above, are only for promoters and do not need to be used by the Nutrition Volunteers when sharing with their neighbors.

Each exercise (section of the lesson plan) is identified by a small picture. Pictures are used to remind non-literate Nutrition Volunteers of the order of the activities. For example when it's time to lead the game the lesson plan shows a picture of people laughing as if they are enjoying a game (see below). The pictures in the lesson plan help to cue Nutrition Volunteers of the next activity. Review the descriptions below for more information.

1



The first activity in each lesson is a **GAME**. Games help the participants to laugh, relax and prepare for the lesson. Some games review key messages that the participants have already learned. Some games promote the belief objectives. Make sure that everyone participates in the games.

2



Following the game is the **ATTENDANCE AND REPORTING** section. All facilitators (Health Promoters) will take attendance. They will also collect information to complete the Promoter Reporting Guide. The promoter follows up with any difficulties that the Nutrition Volunteers had teaching the previous lessons. Refer to the role play in Lesson 5 for more information.

3

Next the facilitator presents the **LESSON** that Nutrition Volunteers will take to beneficiary households that month. The Promoter will use the IYCF Counselling/Action Card and Promoter Lesson Plan. He or she uses descriptions from the Nutrition Volunteer Care Group Participant Flipchart and hints from the Nutrition Volunteer Care Group Orientation Guide to guide his or her teaching.

A



Sometimes there are stories followed by discussion questions. These questions help the facilitator to find out the caregivers, WRA and PLW current practices (related to the lesson). This section is marked by the **A (ask)** in the ASPIRE method. This section is meant for discussion, not for teaching. Be sure to let everyone voice their opinions

The ASPIRE Method, explained in detail in Lesson 2:

A- Ask
S- Show
P- Probe
I- Inform
R- Request
E- Examine

S



The **second, third and fourth picture** in each lesson are for teaching the key objectives of the lesson. When showing a flipchart page [the **S (Show)** - in ASPIRE], ask “What do you see in this picture?” Let the participants respond and describe what they think the flipchart pictures are telling them.

Next, **EXPLAIN THE KEY MESSAGES** written on the back of the flipchart. The key messages also appear as captions on the flipchart pages. Be sure to explain each picture using the additional bullets printed on the back of the flipchart (or in the NV Orientation Guide). The NV Orientation Guide also contains **additional information** for the trainer. The additional information does not need to be discussed during the lesson unless it directly relates to questions by the participants.

After the fourth picture of the lesson, sometimes there is an **ACTIVITY**. Activities are “hands-on” exercises to help the participants understand and apply what they have learned. Most of these activities require specific materials and preparations.



If an activity during a lesson requires specific materials, an **Activity Leader** is responsible to organize the materials for the Lesson Activity. The Activity Leader for a lesson is elected during the meeting prior. The Activity Leader meets with the facilitator ten minutes before **each lesson** to discuss the needed materials for the next lesson’s activity. The Activity Leader is responsible to talk with the others (Nutrition Volunteers or neighbors) during the “Attendance and Reporting” to organize the materials needed for the next meeting, asking them to volunteer to bring the items. The facilitator will lead the activity, but the Activity Leader will support her by organizing the volunteers and aiding the facilitator as needed during the activity.

P

After the activity, the facilitator completes the **P-I of the ASPIRE method**.



In the **P (probe)** section the facilitator asks if there are any obstacles that may prevent the caregivers from trying the new practices. They discuss these obstacles and then move to the next section.

I



Then the facilitator **informs** the caregivers of ways to overcome the concerns that are mentioned. The facilitator gives more information or a different perspective to help the caregivers understand how to move forward.

Next is **PRACTICE AND COACHING** (activity). This section is required for the training of Nutrition Volunteers. We want to make sure that they understand the material and can present it to others. In this small group activity, the promoter can observe and coach those who are having difficulty.

R

Finally the facilitator completes the **R-E of the ASPIRE method**.



The facilitator **requests** a commitment from the Nutrition Volunteer (or caregivers) to begin practicing the new practices they have discussed. If they agree, the caregivers should make a verbal commitment. It is up to the caregivers to make a choice. They should not be forced to make a commitment if they are not ready.

E



The last section is where the facilitator **examines** the Nutrition Volunteer (or caregivers') practices based on the teaching from the last lesson. The facilitator encourages them to try the new practices they have not yet done.

All lessons follow the pattern described above. Lessons can be adapted as needed to fit the needs of your care group. Lessons should not exceed two hours in length although some lessons may take longer than others.

LESSON 1: INTRODUCTION TO CARE GROUPS

Objectives



- Caregivers will be able to describe the project goal: all parents will take actions to help their children grow smart, healthy and strong. That is, infants and children will not die of malnutrition and preventable diseases before age two, but be healthy and strong.
 - Mothers will have good nutrition and health while pregnant and give birth to healthy infants.
 - Caregivers² will be able to prepare healthy foods for their children to grow smart and strong.
 - Caregivers will prevent, identify and manage childhood diseases.
 - Caregivers will keep water, food and bodies clean to prevent illness and disease.
- Caregivers will be able to name the FANSER partner organizations: BMZ/GIZ, CRS, Mansa Diocese (Health Desk, Caritas) and Chipata Diocese (Caritas) and Action Africa Help.
- Caregivers will be able to describe those who will be reached with the health messages: households with pregnant and lactating women and children under 2 years of age.
- Caregivers will be able to explain why the FANSER project is targeting WRA, pregnant and lactating women and children less than 24 months.
 - The largest increase in malnutrition (poor nutrition) occurs in the first 24 months of life.
 - By targeting this age group, we will see the greatest reduction in child sickness and death.
 - If children survive the first two years of life and grow well, they are more likely to be healthy for many years in the future.
- Caregivers will believe that change is possible.



MATERIALS:

- Attendance Registers for Nutrition Volunteers
- Care Group Orientation Nutrition Volunteer Flipchart for the promoter and each Nutrition Volunteer

² The term caregivers refers to all beneficiaries who care and support children in the FANSER project (Promoters, Nutrition Volunteers, beneficiaries and their families).

LESSON 1 SUMMARY:

- Game: Getting to Know You
- Attendance
- Share the story and ask the women about their beliefs about change: Healthy Children.
- Show pictures and share key messages on flipchart pages 6-11: The FANSER Goals Reaching WRA, PLW and Children, and FANSER Partners.
- Activity: FANSER Song
- Probe about possible barriers
- Inform them of possible solutions to the barriers
- Practice and Coaching in pairs
- Request a commitment



GAME:

Getting to know you
10 minutes

1. Ask Nutrition Volunteers to talk to the woman sitting next to them to find out about their family (how many children, how old are they, what are their names, etc). Finally, ask what they hope to learn from being a Nutrition Volunteer.
2. In a large group, ask each Nutrition Volunteer to introduce her neighbor until everyone has been introduced.



ATTENDANCE:

5 minutes

1. Take attendance, marking the attendance sheet for those who are present and those who are absent.

HEALTHY CHILDREN

(Picture 1.1)

10 minutes

STORY

- Read the story on page 4 of the flipchart.
- The story explains how the FANSER project changed the old woman's community.
- The story is set in the future. It describes the changes seen by the old woman. It describes how women will talk about the FANSER project many years from now.

The old woman says, "Of all my children, your father was the strongest child. My other children were often sick and lacked energy. I was pregnant with your father when the FANSER project began. Because of the FANSER project, the community made changes that helped children to grow. Children were born healthy and were sick less often. Children grew taller and stronger than those born before the project. Today, children do not struggle, but are healthy and strong in the first years of life."

A ASK

- Read the questions on page 4 of the flipchart.
- Ask the first questions to review the changes that occurred in the story.
- Ask the last two questions to encourage the women to discuss how the project goal might change life in the community? Encourage the women to think about how healthy children might make life easier for the parents. Would it affect their productivity, their finances, and their happiness?
- **Encourage discussion. Don't correct "wrong answers."** Let everyone give an opinion. This page is for discussion, not for teaching.
- After the participants answer the last question, move to the next flipchart page by saying, "Let compare your ideas with the messages on the following pages."



- ASK: What problems existed when the old woman was having children? How did it change?
- ASK: Are children in your community healthy? Why or why not?
- ASK: How would life be different if all children were healthier and stronger?

FANSER GOALS

(Picture 1.2)

5 minutes

S SHOW

- Ask the WRA, PLW/caregivers to describe what they see in the pictures on page 7.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 6 and 7.
- Use the captions on the flipchart to remind you which images represent each point.

- **Children will grow smart.**
 - Caregivers will be able to prepare healthy foods for their children to grow smart.
 - Healthy foods allow the brain to grow and develop.
- **Children will be strong.**
 - Caregivers will be able to prepare healthy foods to strengthen their bones and muscles.
 - Children will have more energy and strength.

- **Children will be healthy.**

- Mothers will have good nutrition and health while pregnant and give birth to healthy infants.
- Caregivers will be able to diagnose illness and get help quickly.
- Caregivers will be able to help their children when they are sick to overcome the illness.
- Caregivers will keep water, food and bodies clean to prevent illness.

ASK: Are these goals important to you? Why or why not?

ADDITIONAL INFORMATION FOR THE TRAINER

Stunting Rates

Province	Stunted children under 5 years
Eastern	34%
Luapula	45%

Source: Zambia Health and Demographic Survey, 2018

- The FANSER project will not only increase health, but also help contribute to reducing stunting in infants and young children.

REACHING MOTHERS AND CHILDREN

(Picture 1.3)

5 minutes

SHOW

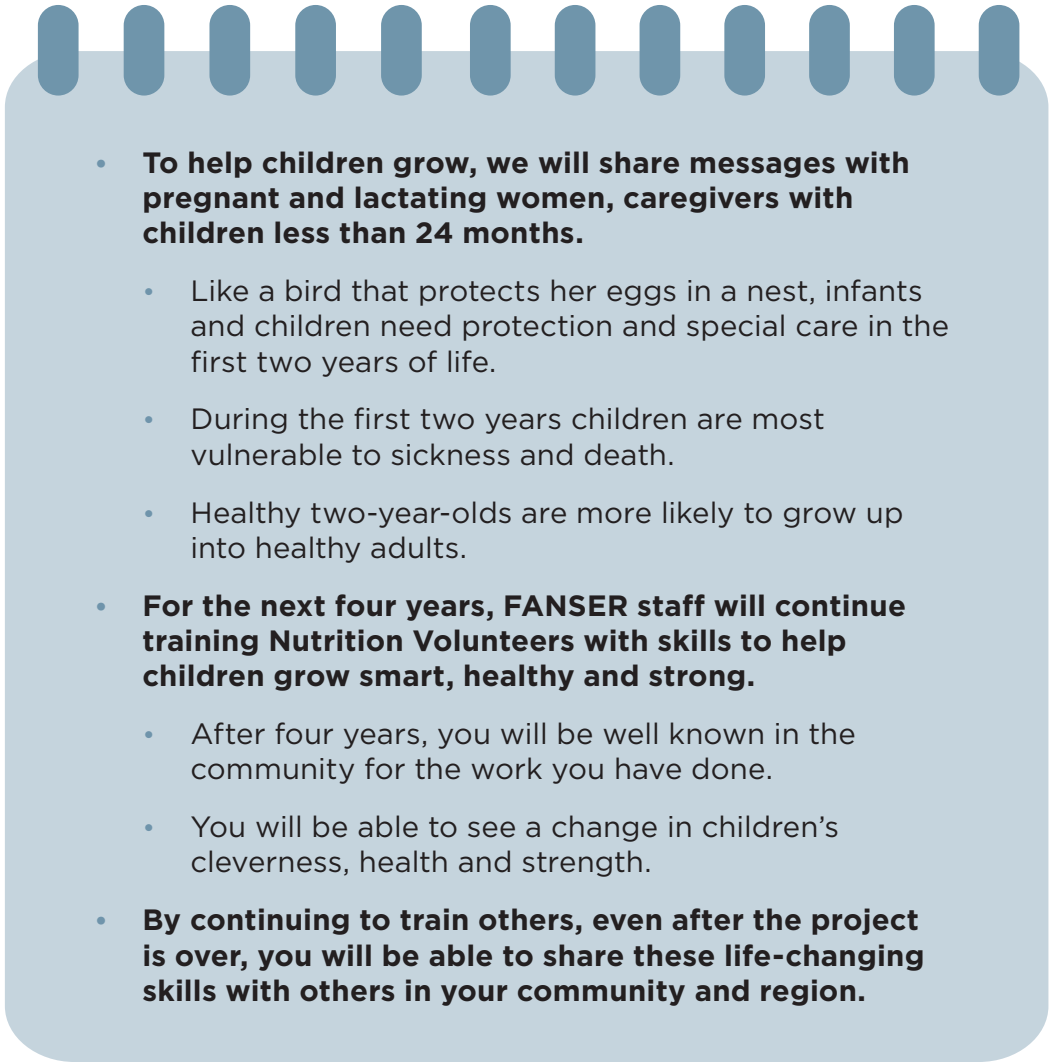
- Ask the caregivers to describe what they see in the pictures on page 9.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 8 and 9.
- Use the captions on the flipchart to remind you which images represent each point.

- 
- **To help children grow, we will share messages with pregnant and lactating women, caregivers with children less than 24 months.**
 - Like a bird that protects her eggs in a nest, infants and children need protection and special care in the first two years of life.
 - During the first two years children are most vulnerable to sickness and death.
 - Healthy two-year-olds are more likely to grow up into healthy adults.
 - **For the next four years, FANSER staff will continue training Nutrition Volunteers with skills to help children grow smart, healthy and strong.**
 - After four years, you will be well known in the community for the work you have done.
 - You will be able to see a change in children's cleverness, health and strength.
 - **By continuing to train others, even after the project is over, you will be able to share these life-changing skills with others in your community and region.**

ADDITIONAL INFORMATION FOR THE TRAINER

MALNUTRITION

- The greatest increase in malnutrition occurs between 6 and 24 months of age. Six months marks the age when most mothers or caregivers add foods to the infant's diet. It is during this time that infants begin to experience diarrhea more frequently. Frequent diarrhea often results in malnutrition.

FANSER PARTNERS

(Picture 1.4)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 11.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 10 and 11.
- Use the captions on the flipchart to remind you which images represent each point.

- **This project is *your* project. You are the ones who will help children to grow smart, healthy and strong.**
 - With your experience, talents, and time we will be able to see changes.
 - Local leaders, community health workers or the Neighborhood Health Committee and your health promoter will support you with their wisdom and advice when problems arise.
- **There are several other organizations helping you to reach your goal: BMZ/GIZ, CRS, Mansa Diocese (Health Desk, Caritas) and Chipata Diocese (Caritas).**
 - All of these organizations are working with you to help children to grow smart, healthy and strong.
 - Together they will provide training and advice for the next four years so that you will have the skills and knowledge to improve child growth.



ACTIVITY:
FANSER Song
15 minutes

Below is a song which describes the goals of the FANSER project.

We will take action so that our children will grow

Smart, healthy and strong.

With good food and care, and good hygiene our children will grow

We can do it, we can change our community

I can change and I can help my neighbors to change

FANSER is our future, a strong and healthy future

We will take action so that our children will grow

Smart, healthy and strong.

1. Practice the FANSER Song with the Nutrition Volunteers.
2. Sing it several times so that they learn the words.
3. Challenge the women to learn the song and share it with those who ask about the project.



PROBE
10 minutes

P

ASK: Do you agree to work with the FANSER staff to reach this goal? Is there anything that might prevent you from helping the community to reach this goal?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have about the project goals. Together they should try to find solutions to these worries and problems. After five minutes, ask the Nutrition Volunteers to share what they have discussed.



INFORM

5 minutes

I

Help find solutions to their concerns. If a woman offers a good solution to another woman's concern, praise her and encourage others to consider this solution.



REQUEST

2 minutes

R

ASK: Are you willing to commit to working with the FANSER project to help children grow smart, healthy and strong?

Ask each caregiver/WRA/PLW to say aloud the commitment that / is making. For example, I commit to working with the FANSER partners so that children grow smart, healthy and strong, or I commit to reaching pregnant mothers and mothers of children 24 months or younger.

LESSON 2: TEACHING TECHNIQUES



- Nutrition Volunteers will be able to share the flipchart messages using ASPIRE with someone else in the Care Group.
 - Nutrition Volunteers will be able to explain the meaning of each step in ASPIRE, the method for effective facilitation.
 - Nutrition Volunteers will be able to ASK about current practices without judging or criticizing participant answers.
 - Nutrition Volunteers will be able to SHOW the lesson's flipchart pages and explain the key messages for each image.
 - Nutrition Volunteers will be able to PROBE to find out obstacles or problems that might prevent a WRA/PLW/caregiver from trying a new practice.
 - Nutrition Volunteers will be able to INFORM a WRA/PLW/caregiver, giving alternative ideas or suggestions to help them overcome the obstacles that are mentioned.
 - Nutrition Volunteers will be able to REQUEST a commitment from another WRA/PLW/caregiver after each lesson.
 - Nutrition Volunteers will be able to EXAMINE the commitments of a WRA/PLW/caregiver to find out if she has fulfilled her previous commitments.
- WRA/PLW/caregiver will be able to identify the different parts of the lesson with the appropriate pictures.
- Nutrition Volunteers will believe that they can be part of the change in other's lives (change agent).



MATERIALS:

- Two copies of the role play at the end of this lesson
- Nutrition Volunteer Care Group Orientation Flipchart
- Session 1: Smart, Healthy and Strong (one copy for each Nutrition Volunteer)

LESSON 2 SUMMARY:

- Game: Making Eyeglasses
- Share the story and ask about the methods used for teaching others: Teaching for Change
- Show pictures and share key messages on flipchart pages 14-19: Ask and Show, Probe and Inform, and Request and Examine.

- Activity: Role Play with ASPIRE
- Probe about possible barriers
- Inform them of possible solutions to the barriers
- Practice and Coaching in pairs
- Request a commitment



GAME:

Making Eyeglasses
10 minutes

We will begin with a game³. I will show you how you can make eyeglasses. You have to follow my directions. If you follow them, just as I say, you will make a pair of eyeglasses with your hands. Let's work together to see if you can make them.

I will tell you what to do, but you must do it on your own. I won't answer questions or tell you if you are doing it right. You must listen.

Explain the following steps.

1. Press and hold the tips of your thumb and first finger together on each hand. Your fingers should form two small circles on each hand.
2. Keep your fingers pressed together. Now touch the two circles together from each hand so that they are joined in front of you.
3. Next touch your remaining six fingers under your chin, so that the palms of your hands are facing away from you.
4. Keeping your fingers under your chin, move the palms of your hands towards your eyebrows, until you can lay your thumbs across your eyebrows.

ASK: How did you do? Let's try it again. This time I will SHOW you.

Read the same instructions again. Answer questions. Help those who are having trouble. Show them with your hands what they should do for each step.



³ The game is used to demonstrate that people need to SHOW us how to make changes, not just educate about change. This game can be substituted with another game as needed. However, make sure that the new game includes the same learning lesson.

ASK: What can we learn from this exercise? Encourage discussion.

- People learn best when they can see and hear how to do a new thing.
- People learn best when they practice the new thing with someone who has done it before.
- In our project we will be sharing new skills and new practices. We have to show them and help them to practice the new skills.
- The best way to be a new teacher, is to commit to doing the practice yourself first. Then you will know how to instruct others.



ATTENDANCE:

5 minutes

TEACHING FOR CHANGE

(Picture 2.1)

10 minutes

STORY

- Read the story on page 12 of the flipchart.
- The story describes teaching techniques used in the FANSER project.

The great granddaughter says, “How did the community change?” The grandmother explains, “The community selected Nutrition Volunteers. I was chosen as a Nutrition Volunteer. I met with a promoter and learned new things. Then I began to share messages with my neighbors. I told stories and asked questions about my neighbor’s lives. I encouraged my neighbors to try new things. I also made changes at home.”

A

ASK

- Read the questions on page 12 of the flipchart.
- Ask the first question to review the story.
- Ask the second question to find out their beliefs about the effectiveness of these methods.
- Ask the last question to find out their willingness to teach this way.
- **Encourage discussion. Don't correct "wrong answers."** Let everyone give an opinion. This page is for discussion, not for teaching.
- After the participants answer the last question, move to the next flipchart page by saying, "Let's compare your ideas with the messages on the following pages."



- ASK: How did the Nutrition Volunteer help the women change?
- ASK: How do these things help others to change?
- ASK: Do you think you can teach this way?

ASK AND SHOW

(Picture 2.2)

5 minutes

S

SHOW

- Ask the caregivers to describe what they see in the pictures on page 15.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 14 and 15.
- Use the captions on the flipchart to remind you which images represent each point.

- **The word ASPIRE will remind you what to do.**
 - Each letter in ASPIRE represents one step that will help you to be a good teacher.
- **A in ASPIRE stands for ASK.**
 - We should remember to ASK WRA/PLW/caregiver about the practices that they are doing related to the lesson.
 - This will help us to know what to teach.
 - If we are teaching about hand washing, we can ask each WRA/PLW/caregiver, “how often do you wash your hands?”
- **S stands for Show.**
 - Each lesson will have a lesson in a lesson booklet and many lessons will have accompanying flipchart Charts.
 - We ask what they know about the lesson or show them the flipchart page and ask them to describe what they see.
 - Then we explain the lesson plan and the meaning of the pictures.
 - Each picture is explained on the back of the flipchart and in the lesson plan.
 - The main points are also written on the picture page.

ADDITIONAL INFORMATION FOR THE TRAINER

THE ASK

- If the facilitator discovers during the ASK phase that all of the learners are already practicing the new behavior, the facilitator does not need to spend much time explaining the behavior and giving reasons for change. Based on the learner responses during the ASK phase, the facilitator will adapt the teachings so that it is relevant to the learner’s current behaviors and experiences.
- If some of the message points are shared by a learner during the story and discussion, the facilitator can refer back to this discussion. For example the facilitator might review the message and then say, “This message was already explained by Jeanine during the discussion,” instead of re-teaching the same message again. This reaffirms the learners and acknowledges information that is already known by the learners.

PROBE AND INFORM

(Picture 2.3)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 17.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 16 and 17.
- Use the captions on the flipchart to remind you which images represent each point.

- **P and I are the next steps in ASPIRE.**
- **P in ASPIRE stands for PROBE.**
 - After you taught the lesson and shown pictures, ask about obstacles that may prevent the families from trying the new practice.
 - For example, “Is there anything that might make it difficult for you to cover your food to keep out the flies?”
 - Listen to the concerns that the WRA/PLW/caregivers mention.
- **I in ASPIRE stands for INFORM.**
 - Suggest ways that the WRA/PLW/caregivers can overcome the problems that they mention.
 - For example, “You said that you need to purchase fabric to cover your pots. Could you use reeds to weave a lid instead?”

REQUEST AND EXAMINE

(Picture 2.4)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 19.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 18 and 19.
- Use the captions on the flipchart to remind you which images represent each point.

- **R and E are the last two steps in ASPIRE.**
- **R in ASPIRE stands for REQUEST.**
 - Ask the WRA/PLW/Caregiver if they would like to commit to trying the new practice.
 - For example, “We learned about covering foods. What will you commit to do now?”
 - Ask the WRA/PLW/Caregiver to say out loud what s/he has decided to do.
 - It is his/her choice; we will not force WRA/PLW/ Caregiver to change.
- **E in ASPIRE stands for EXAMINE.**
 - Ask the WRA/PLW/Caregiver about the commitments that they made at the last meeting.
 - Have they done the things that they committed to?
 - For example, “At our last meeting, you said you would go to the clinic. Did you go?”

ASK: How do you think these steps will help you to be a good teacher?

ADDITIONAL INFORMATION FOR THE TRAINER

COMMITMENTS

- Many studies have shown that if learners make a verbal commitment in front of others, they are more likely to remember the commitment and actually follow-through on the commitment.
- By allowing the learners to make their own commitments, we allow them to take responsibility and set goals that are relevant to their own experience.
- The facilitator's role is to make it easy for others to proceed through the process of change. Reminding and helping them follow-up on their commitments is one way of achieving this goal.



ACTIVITY:

Preview of Session
1-5 minutes

1. Ask each Nutrition Volunteer to look at Session 1: Smart, healthy and strong Handout for Nutrition Volunteers. Ask her to look for each of the small ASPIRE pictures in the handout? (Where is the ASK image? Where is the SHOW image? Where is the PROBE image?)
2. Explain to the Nutrition Volunteers that the small images are clues to help them remember what to do next when they are teaching.
3. When they begin teaching, they will see these small images in their lesson plans and will use the images to help them follow the ASPIRE method. However, these images are not included in the IYCF counseling/Action cards that will be used during the lessons.



PROBE

10 minutes

P

ASK: What do you think about these ideas? Is there anything that might prevent you from using the ASPIRE method and sharing with others?

Ask WRA/PLW/caregivers to talk to a woman sitting next to them. They should share any personal concerns that they have about the lesson. Together they should try to find solutions to these worries and problems. After five minutes, ask the Nutrition Volunteers to share what they have discussed.



INFORM

5 minutes

I

Help find solutions to their concerns. If a WRA/PLW/caregivers offers a good solution to another WRA/PLW/caregivers concern, praise him/her and encourage others to consider this solution.



REQUEST

2 minutes

R

ASK: Are you willing to commit to using the APSIRE method with your neighbors?

Ask WRA/PLW/caregivers to give a verbal declaration that they will use the ASPIRE method every time they share with others.

LESSON 3: NUTRITION VOLUNTEER RESPONSIBILITIES



- Nutrition Volunteers will meet with the promoter (in the care group) once every month to learn a new lesson.
- Nutrition Volunteers will commit to being a role model; making healthy changes in their home and modeling healthy practices to others.
- Nutrition Volunteers will share a new lesson with the WRA/PLW/caregivers in their neighbor⁴ households once every month.
 - o WRA/PLW/caregivers neighbor household groups consist of at least eight and not more than 12 pregnant mothers or mothers with children under two and women of reproductive age.
 - o Once each month the Nutrition Volunteers will visit each neighbor's home (household visit).
- During each household visit, Nutrition Volunteers will share the lesson plan for the month and show complementary pictures from the IYCF counselling /action cards.
 - o The IYCF counselling/action card have messages that are specific to pregnancy and the monthly development of the child. These messages will help mothers to adopt healthy practices relevant to the child's growth.
- Before each lesson, Nutrition Volunteers will ask each neighbor household about the child's health by checking the under 5 card of any child under 24 months. If necessary, the Nutrition Volunteer will refer the child to the health facility.
- Nutrition Volunteers will report all referrals to the promoter at each meeting.



MATERIALS:

- One extra copy of the role play
- Nutrition Volunteer Care Group Orientation guide
- IYCF counselling/action card

LESSON 3 SUMMARY:

- Game: Hello Hello
- Share the story and ask the women's feelings about being a Nutrition Volunteer: A Family that Brought Change
- Show pictures and share key messages on flipchart pages 22-27: Teaching Nutrition Volunteers and Mother Groups, Asking about the Family's Health, and Sharing Lessons from the IYCF counselling/action cards.

⁴ Mother groups represent the beneficiaries who are reached every month by the Nutrition Volunteers.

- Activity: Role Play
- Probe about possible barriers
- Inform them of possible solutions to the barriers
- Request a commitment



GAME:

Hello Hello
10 minutes

1. Ask the Nutrition Volunteers to stand in a circle.
2. Select one Nutrition Volunteer. Ask her to walk around the outside of the circle and tap someone on the shoulder.
3. The “tapped person” walks the opposite way around the circle, until the two women meet. They greet each other three times by name.
4. The two Nutrition Volunteers then walk quickly back to the open spot, walking in opposite directions around the circle. The person who fills the spot first is the winner.
5. The other Nutrition Volunteer then walks around the outside of the circle and chooses someone to tap.
6. Repeat the game until everyone has had a turn.

Now that we are energized, let’s begin today’s lesson.



ATTENDANCE:

5 minutes

A FAMILY THAT BROUGHT CHANGE

(Picture 3.1)

10 minutes

STORY

- Read the story on page 20 of the flipchart.
- This story gives some reasons why the old lady's husband was proud of her new responsibilities.

The old lady says, "I remember when I was chosen to be a Nutrition Volunteer. My husband was so proud. He said, 'In our community, the sound of crying is often heard. Children are always sick and struggle to survive. Soon our community will be filled with laughter. Children will be healthy and strong. I am so proud that you were chosen to bring change.'"

A ASK

- Read the questions on page 20 of the flipchart.
- Ask the first question to review the reason why the Nutrition Volunteer's husband was proud of her role as a Nutrition Volunteer.
- Ask the second question to discuss the beliefs and thoughts of the Nutrition Volunteers and their families about the new responsibilities.
- **Encourage discussion. Don't correct "wrong answers."** Let everyone give an opinion. This page is for discussion, not for teaching.
- After the participants answer the last question, move to the next flipchart page by saying, "Let's compare your ideas with the messages on the following pages."



- ASK: Why was the old lady's husband proud of his wife?
- ASK: What does your family think of you working as a Nutrition Volunteer?

TEACHING NUTRITION VOLUNTEERS AND MOTHER GROUPS

(Picture 3.2)

5 minutes

S SHOW

- Ask the caregivers to describe what they see in the pictures on page 23.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 22 and 23.
- Use the captions on the flipchart to remind you which images represent each point.

- **Nutrition Volunteers will learn a new lesson every month and share it with their neighbors.**
 - Nutrition Volunteers will meet in the care group with the Promoter every month.
 - Every month Nutrition Volunteers will learn a new lesson.
 - Nutrition Volunteers will share the messages with their neighbor groups (8-12 women).
- **Each month, the Nutrition Volunteer will share one lesson in each home.**
 - Once a month the Nutrition Volunteer will share the new lesson at each home.
 - During each household visit, Nutrition Volunteers will encourage other family members in the household to participate in the lesson.

ASKING ABOUT THE FAMILY'S HEALTH

(Picture 3.3)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 25.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 24 and 25.
- Use the captions on the flipchart to remind you which images represent each point.

- **Ask about the health of the family.**
 - At the start of each lesson, the Nutrition Volunteer will ask each household about the health of a WRA and child's health by checking the under 5 card of any child under 24 months.
 - She will refer families to the health center to treat illnesses if the child has poor health.
 - She will take questions to the Nutrition Volunteer Care Group.
 - Nutrition Volunteers will listen for births, deaths and new pregnancies for women in the group and their children under 24 months.
- **Report to health center and Link households to other community services.**
 - The promoter will share this information with the local clinics, Ministry of Health and FANSER project staff.

- This will help the clinics to understand the health needs of the families in the community.
- This information will also help the Nutrition Volunteer Care Group to understand the needs of the families in the community.

SHARING MESSAGES FROM THE IYCF FLIPCHART

(Picture 3.4)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 27.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 26 and 27.
- Use the captions on the flipchart to remind you which images represent each point.

- **The IYCF Flipchart contains messages to improve the health of infants and young children.**
 - Each page has a picture with captions on the front and important points on the back.
 - The IYCF Flipchart has messages on sanitation, feeding practices, nutrition for mother and child, growth monitoring and many more.

- **The Nutrition Volunteer will use the IYCF Flipchart to complement lessons each month.**
 - The Nutrition Volunteer will receive a twopage lesson plan to guide her in the use of the flipchart.
 - The flipchart will help mothers to better understand the lesson.
 - The flipchart will also interest others in the household and encourage discussion.



ACTIVITY:

Role Play
15 minutes

1. Ask for three volunteers to act out the role play at the end of this lesson with you. Give one copy of the role play to each volunteer.
2. For low literate audience, you might also consider asking a literate volunteer to read the role play. Each volunteer should listen and then act out each sentence after it is read. Adapt as needed.
3. After the role play is finished, ask the discussion question below.

ASK: What did you see in this presentation?

4. Encourage discussion. Add any of the following points that are not mentioned:
 - a. The Nutrition Volunteer explains that she is a volunteer that will be visiting every month.
 - b. She reminds the neighbor of the project goals.
 - c. She begins by asking about the family's health.
 - d. She refers families to the health center to treat illnesses mentioned.
 - e. At the end of the lesson, she gives two messages with the ActionCard.

ASK: What do you think will help the Nutrition Volunteer to be a successful Nutrition Volunteer?

5. Encourage discussion. Add any of the following points that are not mentioned.
- a. She is willing to learn new things and come to all of the trainings.
 - b. She communicates easily with others. She listens and respects others.
 - c. She helps others to try new practices.
 - d. She is committed to continue helping mothers even after all the training is complete.
 - e. She believes that change is possible and encourages other mothers to believe too.



PROBE

10 minutes

P

ASK: What do you think about these ideas? Is there anything that might prevent you from completing all of your responsibilities?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these messages. Together they should try to find solutions to these worries and problems. After five minutes, ask the Nutrition Volunteers to share what they have discussed.



INFORM

5 minutes

I

Help find solutions to their concerns. If a woman offers a good solution to another woman's concern, praise her and encourage other mothers to consider this solution.

ROLE PLAY

Visiting the Mother Groups (Asking about Family Health and the Picture Cards)

ADDITIONAL INFORMATION FOR THE TRAINER:

This role play will only be used with Nutrition Volunteers and does not need to be shared with neighbor groups.

SETUP:

The promoter will act as the Nutrition Volunteer. She is standing outside the door of one of her neighbors. Inside the house the mother and Mother-in-Law are sitting.

EXPLAIN:

The Nutrition Volunteer is coming to visit one of her neighbors.

Nutrition Volunteer: Greetings to you and your family. Is this a good time to talk? Would your husband or others in your family like to join us?

Mother: My husband is not here. But my mother-in-law is here with me. She will listen too.

Nutrition Volunteer: As you know I am an elected community volunteer, a Nutrition Volunteer, and I have been receiving training to help families raise healthy children.

Mother: Yes. We are very glad that you have come.

Nutrition Volunteer: I am a volunteer. I don't receive any money from the project. I volunteered to visit the neighbor groups every month so that we can learn together. I believe that we can help bring change to the community so that our children will be smart, healthy and strong.

Mother: Yes I have heard of this program.

Nutrition Volunteer: Yes. (pause) How is your family; are you and your children well?

Mother: My youngest child has a fever.

Nutrition Volunteer: Have you taken him to the clinic?

Mother: Yes, and I received some medicine this morning. He seems to be getting better.

Nutrition Volunteer: Good. Make sure to give all the medicine that the clinic prescribed. If the child doesn't improve, you should return tomorrow. How is the rest of your family?

Mother: The rest of us are healthy.

Then, at the end of the lesson...

Nutrition Volunteer: Now that we have finished the lesson, I want to remind you of some health messages for your children. How old are your children?

Mother: The youngest is 6 months and the next is 3 years old.

Nutrition Volunteer: Our project focuses on children under age 2, so I can share health messages only for your youngest children.

Nutrition Volunteer: For a child 6 months of age, you should begin giving one or two spoonfuls of thick, soft porridge once or twice a day after breastfeeding. After the infant begins to accept the porridge, begin giving four large spoonfuls of porridge three times a day after breastfeeding.

Mother: How do I prepare the porridge?

Nutrition Volunteer: For porridge, you can mix 4 parts mealy-meal and 3 parts groundnut flour with water and heat until thick and easy for an infant to swallow. You can even try mixing in a bit of ground dried leaves like pumpkin leaves.

Mother: I will try it this week and see if he likes it.

Nutrition Volunteer: Yes try to give him four spoonful's three times a day after breastfeeding. At our next meeting, I will share more messages to help you add new foods.

Mother: Yes your teaching is good. I will try the porridge to see if he will take it.

Nutrition Volunteer: We will hold a cooking demonstration with all the neighbors at my house on Wednesday morning. Are you coming?

Mother: Yes I will come.

Nutrition Volunteer and Mother exchange greetings and end the meeting.

LESSON 4: I CAN CHANGE!

Objectives



- Caregivers will be able to explain one way in which they have started a new practice (or changed) during their life.
- Caregivers will be able to explain at least three things that help people to make changes in their lives.
- Caregivers will be able to name three reasons that they have confidence in their ability to change.
- Caregivers will be able to reflect on their lives and identify which of their own behaviors or attitudes they would like to change.
- Caregivers will believe they are able to make changes with their current skills, knowledge and abilities.
- Caregivers will believe that change is possible.



MATERIALS:

- Several strips of fabric to use as blindfolds
- A rope with five knots, or five rocks
- Care Groups Orientation Nutrition Volunteer Flipchart

LESSON 4 SUMMARY:

- Game: Blindfold Walk
- Share the story and ask about the women's confidence in their ability to change.
- Show pictures and share key messages on flipchart pages 30-35: Thinking about Change, Things That Help Us to Change and Believe That You Can Change.
- Activity: The Confidence Ruler
- Probe about possible barriers
- Inform them of possible solutions to the barriers
- Request a commitment



GAME:

Blindfold Walk
10 minutes

1. An obstacle course is set for everyone to see (place chairs, or mats, or other people in the path to the other side). An ending line or “target” is identified on the opposite side of the room.
2. Participants split into pairs. One of the pair ties fabric around their head covering their eyes (or closes their eyes tightly) so they cannot see.
3. The other member of the pair now gives advice and direction to their partner to help them to get safely to the other side of the room.

ASK: What helped you to get to the other side? If you tried to cross the room without any help, would it be difficult for you? Encourage discussion.

ASK: What can we learn from this game?

- As we teach, we need to guide those who are “following unhealthy practices” or “blindfolded.”
- We need to encourage others and support them, (not force them) to make changes in their lives.

Now that we are energized, let’s begin today’s lesson.



ATTENDANCE:

5 minutes

STORY OF CHANGE

(Picture 4.1)

10 minutes

STORY: MARTHA'S HARD WORK

- Read the story on page 28 of the flipchart.

When Martha's husband passed away, Martha went into hardships. She did not have any form of income. Her children were still young and could not help her in the fields. She had moved away from her home village. Sometimes her in-laws helped her, but they were busy and had other responsibilities. Her neighbors wondered how she managed to survive with such little help and no close family.

Despite all this, she was not disheartened and she decided to start weaving baskets. She tried to sell them so as to earn a living for her family. But even then, it was not at all easy because it was difficult for her to find buyers. And when she was lucky to come across a potential buyer, they offered too little money. She could barely afford salt. One day, she met some people from Lusaka who were in the area to attend a family ceremony. They were pleased by her courage and they decided that they would start buying all the baskets that she could weave. After that, Martha organized an association so as to be able to weave many baskets. As a result, today she has overcome poverty.

A

ASK

- Read the questions on page 28 of the flipchart.
- Ask the first two questions to review the points in the story.
- Ask the last question to find out how confident the women are in their own ability to change and bring change.
- **Encourage discussion. Don't correct "wrong answers."** Let everyone give an opinion. This page is for discussion, not for teaching.

- After the participants answer the last question, move to the next flipchart page by saying, “Let’s compare your ideas with the messages on the following pages.”



- ASK: What people in your community have you seen make great changes?
- ASK: How did they make the change?
- ASK: What would help people in this community to work together towards change?

THINKING ABOUT CHANGE

(Picture 4.2)

5 minutes

S

SHOW

- Ask the caregivers to describe what they see in the pictures on page 31.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 30 and 31.
- Use the captions on the flipchart to remind you which images represent each point.

- **Change is normal part of life. We all make changes.**
 - When we marry, we change the way we live.
 - When we have children, we change the way we prepare food and spend our time.
 - As the weather changes, we have to change the foods that we eat because not all foods are available throughout the year.

- Some changes happen very quickly, such as buying soap for washing.
- Other changes take a long time to learn, such as learning to sew.

ASK: What are some changes that you have already made in your life?

ADDITIONAL INFORMATION FOR THE TRAINER

EXAMPLES OF CHANGE

- The women/men in the group may have trouble thinking of something they have changed. The promoter should give an example from their own life; something that you have changed about yourself rather than how you changed someone else.
- For example, “I changed the way that I fed my children after learning about the importance of porridge,” or “I changed where I go when my child has fever because I changed my beliefs about the causes of malaria.”

THINGS THAT HELPS US TO CHANGE

(Picture 4.3)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 33.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 32 and 33.
- Use the captions on the flipchart to remind you which images represent each point.

- **Encourage one another.**
 - Help each other to try new practices.
 - Give people hope that they can change.
 - Ask advice from others who have already tried the new practices.
- **Practice the new skill.**
 - Practice making the new type of porridge. Practice showing equal care to your children.
 - The more you practice the new skill, the easier it will be to make a long-term change.
- **Make changes in small steps.**
 - Make easy changes first.
 - Once you have success with the small things, it will help you to make bigger changes.

BELIEVE THAT YOU CAN CHANGE

(Picture 4.4)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 35.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 34 and 35.
- Use the captions on the flipchart to remind you which images represent each point.

- **Remember your past success.**
 - Remind yourself of positive changes that you have already seen in your life.
- **The community chose you.**
 - Your community is confident of your skills and experience.
 - They selected YOU to help them to reach the goal.
 - They believe in you.
- **Remember that you have others to help you.**
 - The neighbor groups (and care group) will help you as you make changes together.
 - We will equip you with skills and knowledge so that your children grow smart, healthy and strong.

ASK: How many of you have been able to keep the commitments that you've made so far?

ASK: How can that success help you make other commitments?

ADDITIONAL INFORMATION FOR THE TRAINER

CREATIVITY

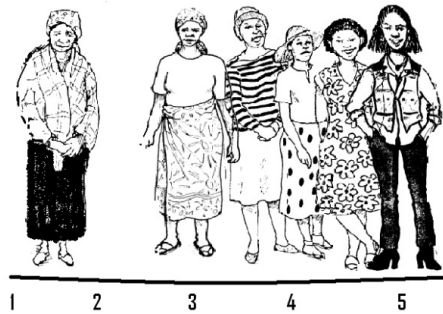
- The FANSER project will give families new skills and ideas to help children grow. However, women in the groups can also bring their own ideas for bringing change.
- For example, they might discover a new way to build a hand washing station with local materials, or a new way to remember the childhood danger signs.
- Encourage everyone to participate in bringing change with creative solutions to local problems.



ACTIVITY:

The Confidence Ruler
15 minutes

1. Put a piece of rope on the ground with five knots in it (or five rocks spread apart in a line). Explain that we are going to talk about how people feel about their ability to change.
2. Ask the women/men to think of something they would like to change in their life. For example, they want to start keeping a few chickens for eggs, or stop fighting with their spouse, or show equal value to their children.
3. Wait for everyone to think of something to change.
4. Then ask, “How confident are you that you will be successful changing this thing?”
5. Explain that one end of the rope (where the 1 is above) represents that you think it is completely impossible for you to change this thing with your current skills and knowledge. Explain that the other end (5) represents something that you think you will definitely be able to change with your current skills and knowledge.
6. The promoter should demonstrate with an example from his/her own life, standing on the line at the place that represents his/her confidence level.
7. Then ask the rest of the group to stand on the line at the point that represents their belief in their ability to change. If more than one person wants to stand on the same number, have them stand shoulder to shoulder.
8. Discussion:
9. Ask one person standing near the lower end of the line (1 or 2):
 - a. “So you don’t feel too confident in your ability to change. What are the things that you would need to happen to help you feel more confident in your ability to change? Are there certain skills that you would need to learn? What skills?”
 - b. “If you didn’t make the change that you are thinking about, what are the negative things that could happen?”
 - c. “What would be the good things about making the change that you want to make?”



- d. Even though you don't feel very confident about change right now, are there some people who would be willing to help you make the change if you asked them? Who are those people?
10. Ask one person standing near the middle of the line (3):
- a. "Why would you rate your ability to change here in the middle rather than at 0 or 1?"
 - b. "If you didn't make the change that you are thinking about, what are the negative things that could happen?"
 - c. "What would be the good things about making the change that you want to make?"
 - d. "Who are the people that you think will support you in making the change you want to make?"
11. Ask one person standing near the high end of the line (numbers 4 and 5):
- a. "What are the things that make you confident in your ability to change?"
 - b. "Who are the people that you think will support you in making the change you want to make?"
12. Ask everyone to sit down. Ask. "What can we learn from this exercise?"
- a. Review the reasons mentioned for the participants' confidence. Encourage the women that change is possible and they should know that the care group will support them as they try new practices in their lives.



PROBE

10 minutes

P

ASK: What do you think about these ideas? Is there anything that might stop you from believing that you are able to make changes in your life?

Ask mothers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have with these messages. Together they should try to find solutions to these worries and problems. After five minutes, ask the Nutrition Volunteers to share what they have discussed.



INFORM

5 minutes

I

Help find solutions to their concerns. If a woman offers a good solution to another woman's concern, praise her and encourage other mothers to consider using this solution when they talk with others.



REQUEST

2 minutes

R

ASK: Are you willing to make a commitment to the teachings you have heard today? What is your commitment?

Ask each mother to say out loud a new commitment that she will make today. Each mother can choose the commitment that is most important to her.

For example: I believe that I am able to make healthy changes in my life. I believe that the women in my care group (or neighbor group) will support me as I make changes. I commit to making healthy changes in my life. I commit to trying new practices to improve child health.

LESSON 5: WATCHING FOR CHANGE AND MONITORING GROUPS

Objectives



- Nutrition Volunteers will watch for changes in the health of their neighbor household groups and the health of their own children.
 - Nutrition Volunteers will look for positive changes in child health.
 - Nutrition Volunteers will look for positive changes in child growth.
- Nutrition Volunteers will record visits and changes in the Nutrition Volunteer Hardcover book.
- Nutrition Volunteers will share changes that they see with the health/sanitation promoter.
- Care Groups will celebrate the small changes that they see every few months.
- Nutrition Volunteers will monitor the pregnancies, presence of women of reproductive age and the age of the children in the neighbor groups to make sure they are reaching the most vulnerable to malnutrition (pregnant mothers, women of reproductive age or women with children under 2).
- Nutrition Volunteers will monitor the size of their group making sure that they do not go over 12 mothers in each group.
- Care Group Leaders will believe that change is possible.



MATERIALS:

- Three copies of the role play at the end of the lesson.
- Nutrition Volunteer Care Group Orientation Flipchart
- Nutrition Volunteer Hardcover books

LESSON 5 SUMMARY:

- Game: Fruit Salad
- Share the story and ask about the group's ideas for monitoring change: Watching Child Growth
- Show pictures and share key messages on flipchart pages 38-43: Waiting for Changes in Family Health, Watching Neighbour Groups, and Recording & Sharing Progress.
- Activity: Role Play - Reporting
- Probe about possible barriers
- Inform them of possible solutions to the barriers
- Request a commitment



GAME:

Fruit Salad
10 minutes

1. The Promoter divides the Nutrition Volunteers into three to four groups. Each group is given a fruit name such as oranges, pawpaw and bananas.
2. Nutrition Volunteers then sit on chairs (or on mats) in a circle. The Promoter stands in the center of the circle and shouts out the name of one of the fruits.
3. All the nutrition volunteers in this fruit group must change places with one another. The Promoter tries to take one of their places as they move, leaving another Nutrition Volunteer in the middle without a seat.
4. The new Nutrition Volunteer in the middle shouts another fruit name and the Nutrition Volunteers in this fruit group must all change places with each other.
5. If someone says, 'fruit salad' all Nutrition Volunteers have to change seats.

Now that we are energized and ready for our lesson, let's begin!



ATTENDANCE:

5 minutes

WATCHING CHILD GROWTH

(Picture 5.1)
10 minutes

STORY: WATCHING CHILD GROWTH

- Read the story on page 36 of the flipchart.
- The story describes how one care group decided to monitor the progress of the FANSER project in their community.

Our care group began to watch (monitor) our children's growth. We wanted to see if the changes we made were helping our children. We began attending monthly growth promotion and monitoring events to have our children weighed. The growth chart on our under 5 cards showed us that our children were growing better. Pregnant women went regularly to the clinic for check-ups. We were encouraged. Even small changes helped our children to grow. It encouraged us to keep working.

A ASK

- Read the questions on page 36 of the flipchart.
- Ask the first two questions to review the messages from the story.
- Ask the last question to encourage the women to brainstorm other ways they can watch for change in the community. Nutrition Volunteers are not required to monitor change. However, if they understand the goal and begin looking for improvements, it will encourage them to continue the work.
- **Encourage discussion. Don't correct "wrong answers."** Let everyone give an opinion. This page is for discussion, not for teaching.
- After the participants answer the last question, move to the next flipchart page by saying, "Let's compare your ideas with the messages on the following pages."



- ASK: Why did the women decide to watch their children's growth?
- ASK: How did watching growth encourage them to continue?
- ASK: What are some other ways you can watch for change?

WATCHING FOR CHANGES IN FAMILY HEALTH

(Picture 5.2)

5 minutes

S SHOW

- Ask the caregivers to describe what they see in the pictures on page 39.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 38 and 39.
- Use the captions on the flipchart to remind you which images represent each point.

- **We can watch for changes in the health of the families in our neighbor groups.**
 - Changes in the number of child illnesses.
 - Changes in the height of children.
 - Changes in the strength of children.
 - Changes in the happiness and playfulness of children.
 - We can encourage our neighbor groups to look for change too.
- **We can combine the information from all Nutrition Volunteers and look for changes. In these pictures the number of children with diarrhea has decreased.**
 - MOH staff will also measure changes and share this information with us.

ASK: How will we know if the change is good?

- If sickness decreases, it will encourage us. We have made improvements.
- If height and strength do not change or start to go down, we need to keep working and make changes in our homes.

WATCHING MOTHER GROUPS

(Picture 5.3)

5 minutes

SHOW

- Ask the WRA/PLW/caregivers to describe what they see in the pictures on page 41.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipcharts pages 40 and 41.
- Use the captions on the flipchart to remind you which images represent each point.

- **Nutrition Volunteers will work with one group of 8-12 neighbor households.**

- If groups have fewer than 12 neighbor households, the Nutrition Volunteers can include more households in the group.
- Groups should have no more than 12 neighbor households.
- In order to reach our goal we must focus on pregnant mothers, women of reproductive age and mothers with children under 2 years of age.

ASK: Why are these things important?

- The child's future health is affected by his nutrition and strength in the womb and in the first two years of life.
- Small groups make it easier for Nutrition Volunteers to balance visiting neighbor households with their own household responsibilities.

ADDITIONAL INFORMATION FOR THE TRAINER

GRADUATION

- When children turn 24 months old, the mothers must graduate from the project, unless they are a Nutrition Volunteer. Nutrition Volunteers are encouraged to continue volunteering.
- Graduated neighbor households will not receive home visits and their attendance will not be tracked on the Care Group Registers.

RECORDING AND SHARING PROGRESS

(Picture 5.4)

5 minutes

SHOW

- Ask the caregivers to describe what they see in the pictures on page 43.



- ASK: Kodi muona chiyani pazithunzi-thunzi izi? **(Nyanja)**
- ASK: Bushe finshi mulemona pafikope ifi? **(Bemba)**

EXPLAIN

- Share the key messages using flipchart pages 42 and 43.
- Share the Nutrition Volunteer Hardcover and discuss how to record visits and observations.
- Use the captions on the flipchart to remind you which images represent each point.

- **We record visits to neighbors in the Nutrition Volunteer Hardcover.**
 - We record monthly visits and any participation on cooking demonstration and preservations
 - When we begin the kitchen garden program, we record kitchen garden demonstrations.
 - Record construction of sanitation facilities such as latrines, refuse pit, dish racks, tippy taps, and clean surroundings
 - We also record observations from our visits to households.
- **When we see change, share it with others.**
 - Share stories of change with our partners, the Ministry of Health, community health workers and the Neighborhood Health Committee and other neighbor households in the community.
 - Sharing will encourage us to continue.
- **We need to celebrate the small changes that we see every few months.**
 - It may take many years to reach our goal of all children growing smart, healthy and strong.
 - We need to celebrate the small changes to encourage us to keep going.



ACTIVITY: Role Play

ADDITIONAL INFORMATION FOR THE TRAINER:

This role play will only be used with Nutrition Volunteers and does not need to be shared with neighbor households.

1. Ask for three volunteers to act out the role play at the end of this lesson with you.
2. Give one copy of the role play to each volunteer.
3. For low literate audience, you might also consider asking another literate volunteer to read the role play. Each volunteer should listen and then act out each sentence after it is read.
4. After the role play is finished ask the following questions.

ASK: What did you see in this presentation?

5. Encourage discussion. Add any of the following points that are not mentioned by the WRA/PLW/Caregivers:
 - a. Nutrition Volunteers are responsible to report their visits to neighbor households as recorded in the Nutrition Volunteer Hardcover at each care group meeting.
 - b. The Promoter asks about problems with the meetings and helps the WRA/PLW/Caregivers to find solutions.
 - c. If there are problems encouraging a new practice a few suggestions are given:
 - Ask other Nutrition Volunteers what they have done to help WRA/PLW/Caregiver's change.
 - Speak with other members in the household about the new practices.
 - Have WRA/PLW/Caregivers who are practicing the healthy practice come and share their experiences with the other WRA/PLW/Caregivers.
 - Seek support from community leaders regarding the new behaviors.
 - d. The Nutrition Volunteers should report changes in the numbers of WRA/PLW/Caregivers in their group as well as any clinic referrals that occurred among their group members.



PROBE

10 minutes

P

ASK: What do you think about these ideas? Is there anything that might stop you from watching for change in the community?

Ask WRA/PLW/Caregivers to talk to the person sitting next to them for the next five minutes. They should share any personal concerns that they have with these messages. Together they should try to find solutions to these worries and problems. After five minutes, ask the Nutrition Volunteers to share what they have discussed.



INFORM

5 minutes

I

Help find solutions to their concerns. If a WRA/PLW/Caregiver offers a good solution to another WRA/PLW/Caregivers' concern, praise him/her and encourage other WRA/PLW/Caregivers to consider using this solution when they talk with others.



REQUEST

2 minutes

R

ASK: Are you willing to make a commitment to the teachings you have heard today? What is your commitment?

Ask each WRA/PLW/Caregiver to say out aloud a new commitment that she will make today. Each WRA/PLW/Caregiver can choose the commitment that is most important to him/her.

For example: I commit to watching for change in the growth of my children. I commit to making sure that only households with WRA/ pregnant mothers or women with children less than 2 years join the Neighbour group meetings. I commit to watching the number of WRA/ PLW/Caregivers in my group so that my group is always full.

ROLE PLAY

Reporting to the Care Group

ADDITIONAL INFORMATION FOR THE TRAINER:

This role play will only be used with Nutrition Volunteers and does not need to be repeated with Neighbour groups. The underline, slanted text explains the actions of the actors. The words in normal font should be said aloud.

SETUP:

You need three volunteers each with a copy of the role play. The volunteers should sit in a small circle in front of the Promoter (just as they would sit in a care group meeting). The Promoter should be sitting with a Health Promoter Reporting Guide and pen on her lap. Nutrition Volunteers should be sitting with a Nutrition Volunteer Hardcover on their laps. A flipchart is sitting nearby.

EXPLAIN:

This role play is a care group meeting between the promoter and a group of Nutrition Volunteers. After the attendance each week, I will ask about the family health any troubles you have had in your Neighbour households. We will begin following this example at our next meeting.

The promoter greets all of the Nutrition Volunteers.

Promoter: Let's begin with attendance.

Promoter looks at his HSPRG and calls the name of the first Nutrition Volunteer (Nutrition Volunteer 1).

Nutrition Volunteer 1: Yes I am here.

The promoter makes a mark on the HSPRG. He then calls the name of Nutrition Volunteer 2.

Nutrition Volunteer 2: Yes

The promoter makes a mark on the HSPRG. He then calls the name of Nutrition Volunteer 3.

Nutrition Volunteer 3: Yes

The promoter makes a mark on the HSPRG. He then calls the name of Nutrition Volunteer 4.

Nutrition Volunteer 3: She could not make it to today's meeting.

The promoter makes a mark on the HSPRG.

Promoter: Let's review your visits and the health of women and children in your neighbor groups.

The promoter calls the name of Nutrition Volunteer 1.

Nutrition Volunteer 1: I met with 9 households. I did not meet with Peggy Phiri household. The family was away visiting relatives. So I did not see them. The family returned this week. I will teach both lessons to the household during the next two weeks.

Promoter: You visited all households, except Peggy Phiri's. You plan to teach the household both lessons at your next meeting.

The promoter marks on the HSPDRG.

Nutrition Volunteer 1: Yes. There are no referrals for the WRA/PLW/Caregivers in my group.

Promoter: You said that none of the WRA/PLW/Caregivers in your group, or their children under 2, were referred to clinic

Nutrition Volunteer 1: Yes

The promoter records referral information on page 2 of HSPRG and calls the name of Nutrition Volunteer 2.

Promoter: How many households did you visit during the month?

Nutrition Volunteer 2: I met with eight of my neighbor households.

The promoter marks the HSPRG.

Promoter: Which household did you not meet with and why?

Nutrition Volunteer 2: I did not meet with Betty Thewo's household because the

household members moved away, but I met with the rest of the other households.

Promoter: Did you teach any other lessons besides last month's lesson?

Nutrition Volunteer 2: Yes, I reviewed hand-washing with soap with all of the WRA/PLW/Caregivers in my Neighbour group.

The promoter records on the HPDRG.

Promoter: You only have eight neighbor households in your group now since Betty Thewo household left.

Nutrition Volunteer 2: Yes.

Promoter: Do you have any referrals to report?

Nutrition Volunteer 2: Yes, Ulembe's daughter had a weight below -3zscore and in the red zone. . I referred her to the clinic .

Promoter: Ulembe's's daughter was referred to the clinic . Ok I will mark that on the report. Is there anything else to report?

Nutrition Volunteer 2: No, that is all.

Promoter records on the HSPDRG.

The promoter calls the name of Nutrition Volunteer 3.

Nutrition Volunteer 3: I visited all 10 of the WRA/PLW/Caregivers in my neighbor group, but only half of them were home.

Nutrition Volunteer 3: You know that it is your responsibility to visit each household. If they are not home at the time you are visiting, you might want to ask them what time would be better for them. You must make sure that you teach all of the mothers that you are given. What topics did you teach?

Nutrition Volunteer 3: Yes. I know. I taught last month's lesson on exclusive breastfeeding.

The promoter marks on the HSPRG.

Promoter: Do you have any referrals to report?

Nutrition Volunteer 3: No there are no changes in the health of my neighbor household group.

Promoter: Ok. No changes.

The promoter marks the HSPRG.

Promoter: Let's talk after the lesson about visiting with the rest of your neighbor households. I can help you with some ideas for meeting with the WRA/PLW/Caregivers . It is important that you visit all households.

Nutrition Volunteer 3: Yes. Let us talk after the lesson. I do not want to be replaced.

Promoter: Ok, we will talk at the end of the lesson. Now that we have taken attendance, tell me about your meetings. How did your visits go? Did the households understand the teachings on exclusive breastfeeding?

Nutrition Volunteer 1: Many people here believe that water and other foods must be

given to the infant when they are born⁵. Some WRA/PLW/Caregivers did not want to commit to changing their ways. They found the teaching very difficult.

Promoter: You were teaching about breastfeeding and some WRA/PLW/Caregivers had trouble accepting the message. What did you do?

Nutrition Volunteer 1: I told them that it was okay if they did not feel ready to make a commitment to exclusive breastfeeding. I told them that I would continue meeting with them, and that they could talk to other mothers and make a decision later.

Promoter: (*Speaking to Nutrition Volunteer 2 and 3*) Did any of you have these troubles?

Nutrition Volunteer 2: Yes, one mother in my group is giving water and other foods to her infant before it is time. So I asked about the health of her infant. Her infant had been very sick. I asked her to try breastfeeding only to see if her infant's health and weight improves. She said she would try it.

Promoter: So, you asked the mother to try out the new practice, and see if the baby's health improved. That is a very good idea. [*Turning to Nutrition Volunteer 1*] You may consider giving this same advice to the household you mentioned the next time that you meet.

Nutrition Volunteer 1: Yes I will try that. I will also see if I can get other mothers who exclusively breastfeed to talk with her. When she hears from these mothers and sees the health of their infants, she may be ready to listen.

Promoter: You may also speak to the others in her household, the mothers-in-law and the husband if they will listen. Once the whole family understands it may be easier for the mother to try something new.

Nutrition Volunteer 3: Yes. That is good. Several other family members joined when I was visiting with the households. It was very helpful.

Promoter: [*To Nutrition Volunteer 3*] Yes, it is very good that you are encouraging others to join. [*To the group*] Any other problems?

Nutrition Volunteer 2: The households that I met with were very happy with this information. They said that it was so good and they wished that they had known sooner.

Promoter: Good. Yes, as we continue to share with households in our community, we hope that they too will share with their neighbors and that many children will be smart, health and strong. Ok. Let's begin the lesson.

⁵ Adapt or insert other common "harmful beliefs" or obstacle to breastfeeding from your barrier analysis findings.

LESSON 6: SESSION 1 - SMART, HEALTHY, AND STRONG

SESSION 1: SMART, HEALTHY AND STRONG

HEALTH PROMOTER LESSON PLAN

Objectives



- Nutrition Volunteers will be able to explain to WRA/PLW/ caregivers why they are making household visits.
- Nutrition Volunteers will be able to explain why it is important WRA, for pregnant women, breastfeeding mothers, babies and fathers to be smart, healthy and strong.
- Nutrition Volunteers will be able to help identify solutions to possible concerns about trying new health and nutrition practices.
- Nutrition Volunteers will make a commitment based on today's teachings.



MATERIALS:

- Cover of counseling cards
- Session 1: Smart, healthy and strong lesson Handout for Nutrition Volunteers (one copy for each Nutrition Volunteer)

LESSON 6 SUMMARY:

- Ask
- Show and explain why it is important for a WRA, pregnant woman, breastfeeding mother, baby and father to be smart, healthy and strong
- Probe about potential barriers to working with FANSER Project and trying new practices
- Inform: discuss solutions to identified concerns
- Practice and coaching in pairs
- Request a commitment



ATTENDANCE:

5 minutes

ASK

A ASK



- ASK: Are children in your community healthy? Why or why not?
- ASK: What have you heard about the FANSER Project?
- ASK: Are you interested in learning new ways to improve child health in your community?

Encourage discussion. Do not correct “wrong” answers. Let everyone give an opinion.

After they respond, explain that, as a Nutrition Volunteer – like the woman in the brown dress in the picture – you are not there to tell WRA/PLW and Caregivers what to do, but rather to share what you are learning about new ways of improving child health and to discuss with them. Make sure they are aware of FANSER project, and what your role as a Nutrition Volunteer is within the project.

Remember, this will be the Nutrition Volunteer’s first visit to the household as a Nutrition Volunteer. It is important to establish a good relationship and help the WRA/PLW/caregivers understand why the Nutrition Volunteer is there. Nutrition volunteers will not be negotiating behavior change with caregivers during this first visit.

ADDITIONAL INFORMATION FOR THE TRAINER:

This information does not need to be discussed during the lesson unless it directly relates to questions by the participants.

- **Key points about FANSER project**
 - The goal of FANSER project is to help children and families grow smart, healthy, happy and strong and help communities to prosper.
 - Project partners include BMZ/GIZ, Catholic Relief Services, Caritas, Health Desk, AAH
 - Through the Nutrition Volunteers, FANSER will reach households with WRA/PLW/Caregivers and children U2 to discuss new ways to improve the health of children and families.
- **Key points about the role of the Nutrition Volunteer**
 - Nutrition Volunteers support WRA/PLW and Caregivers to improve practices to help their children grow smart, healthy and strong.

- Nutrition Volunteers will visit their neighbor households once per month to talk about care practices and share information about new ways to improve children’s health.
- Nutrition Volunteers will support WRA/ PLW and caregivers to choose a new practice to try and to follow through on their commitment.

SHOW AND EXPLAIN

S SHOW

Tips for the facilitator: Although there are no specific images identified to use for the below questions, you can use the cover of the counseling cards once again. When asking about the WRA, breastfeeding mother, baby and father, you can point to that person in the family on the cover of the counseling cards. Or, when asking about a breastfeeding mother or pregnant woman, you can use one of the Nutrition Volunteers as an example, if you know she is pregnant or breastfeeding. Nutrition Volunteers can also refer to people who are there in the room during a household visit.

Ask the questions below and, after the Nutrition Volunteers respond, provide the key messages after each question. Remember to allow time for Nutrition Volunteers to discuss answers to questions before providing an answer.



- **ASK: Have you heard people talking about ways to increase agricultural productivity? What have you heard?**

EXPLAIN

- We know that if we take care of our crops well, using improved techniques and materials, they will grow and produce well, and we will get more sacks of maize or beans per lima. It is the same idea with our children (show cover of counseling cards again) - we need to invest in the very best care, before and after they are born, in order to ensure that they grow up to be smart, healthy and strong. We can learn new ways to ensure they get the best start to life.



- **ASK: Why does a pregnant woman need to be smart, healthy and strong?**
- **ASK: Why does a breastfeeding mother need to be smart, healthy and strong?**

EXPLAIN

- A pregnant woman must be smart to go to ANC early and follow their recommendations; she must be strong and healthy to make a strong healthy baby, and to have a successful childbirth.



- A breastfeeding mother needs to be smart to know the importance of exclusively breastfeeding for the first 6 months. She needs to be smart to plan meals of good foods after baby is six months old. She must be healthy and strong to make plenty of milk and continue breastfeeding while she is working at home, in the fields, and in business.



- **ASK: Why does a baby need to be smart, healthy and strong?**
- **ASK: Why does father need to be smart, healthy and strong?**

EXPLAIN

- Baby needs to be strong and healthy so she will grow up tall and good looking. She needs to be smart so she can succeed in school and make her parents proud!



- Father needs to be smart to plan to ensure there are good foods for baby and mom all year long. He needs to be strong and healthy to do work and help with household chores so the household is peaceful, and smart to help the baby learn and grow smart too.



PROBE

10 minutes

P

ASK: Do you agree to work with FANSER project to learn new ways to help make sure your children and family are smart, healthy and strong? Is there anything that might prevent you from trying these new practices?

Ask Nutrition Volunteers to talk to a woman sitting next to them for the next five minutes. They should share any personal concerns that they have about the project. Together they should try to find solutions to these worries and problems. After five minutes, ask the Nutrition Volunteers to share what they have discussed.

POSSIBLE CONCERNS:

- Other family members (husband, mother-in-law) may not agree with the new practices and may not support the women in trying the new practices.
- Share the messages you learned today with your husband, mother-in-law, and other family members. When visiting your neighbor households, encourage all family members to be present during your visit so that everyone receives the same messages and can talk about, understand, and commit to a new practice together.



INFORM

5 minutes

I

Help find solutions to any concerns they mention. Provide new information or a different perspective to help the Nutrition Volunteers (or caregivers) understand how they can move forward. Encourage other Nutrition Volunteers to contribute their ideas of possible solutions - encourage discussion. If a woman offers a good solution to another woman's concern, praise her and encourage others to consider this solution.



PRACTICE AND COACHING

1. Give each Nutrition Volunteer a copy of the Session 1: Smart, health and strong Handout for Nutrition Volunteers and a set of counseling cards. Ask them to share the teachings they have learned with the person sitting next to them using the handout and the cover of the counseling cards.
2. They should try to teach the person next to them in the same way that the promoter used the flipchart to teach them.
3. After ten minutes, ask the women to switch roles. The other Nutrition Volunteer will share the teachings from the handout and cover of the counseling cards.
4. The Promoter should watch, correct, and help the Nutrition Volunteers who are having trouble.
5. When everyone is finished, answer any questions that the Nutrition Volunteers have about the materials, or today's lesson.



REQUEST

2 minutes

R

ASK: Based on today's teachings, what commitment will you make? Are you willing to commit to trying some simple and doable new ways of improving yours and your children's health?

Ask the Nutrition Volunteers to say aloud the commitment they are making. For example:

- "I commit to working with FANSER project so that my children, and my neighbors' children, grow smart, healthy and strong."
- "I commit to trying a new practice each month so my children grow smart, healthy and strong."
- "I commit to visiting my neighbor group members once a month to help them learn about new ways they can improve their children's health."

Congratulate them on joining this activity to learn more about how to have children and a family that is smart, healthy and strong and to support their neighbors in improving their children's health. Tell them you will share more information with them during the Care Group meeting next month.